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FACSIMILE SUBMISSION UNDER 37 CFR 1.8

TO:	FROM:
Mail Stop Amendment	Jason D. Kelly
COMPANY:	DATE:
U.S. Patent and Trademark Office	NOVEMBER 3, 2006
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
1-571-273-8300	3
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	1023-333US01
RE:	APPLICATION SERIAL NUMBER:
Supplemental Information Disclosure Statement	10/731,881

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Carl D. Wahlstrand; Darren A. Janzig; Robert M. Skime	Confirmation No.	6687
Serial No.:	10/731,881	Docket No.:	1023-333US01
Filed:	December 9, 2003	Customer No.:	28863
Examiner:	Unknown	Group Art Unit:	3738
Title:	REDUCING RELATIVE INTERMODULE MOTION IN A MODULAR IMPLANTABLE MEDICAL DEVICE		

CERTIFICATE UNDER 37 CFR 1.8-I hereby certify that this correspondence is being transmitted via facsimile to the United States Patent and Trademark Office on November 3, 2006.

By: Patricia Cygan
 Name: Patricia Cygan

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendments
 Commissioner for Patents
 Alexandria, VA 22313-1450

Dear Sir:

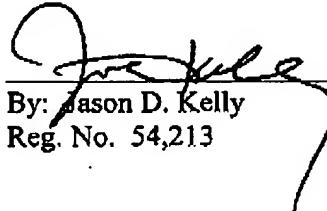
Applicant submits the references listed on the attached form PTO-1449. This statement is being filed, to the best of Applicant's knowledge, before the receipt of a first Office Action on the merits.

Copies of the U.S. patents are not enclosed as this requirement has been waived by the U.S. Patent Office.

Respectfully submitted,

Date: November 3, 2006

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 By: Jason D. Kelly
 Reg. No. 54,213

Page 1 of 1

Form 1449* INFORMATION DISCLOSURE STATEMENT IN AN APPLICATION (Use several sheets if necessary)	Docket Number: 1023-333US01	Application Number: 10/731,881
	Applicant: Carl D. Wahlstrand; Darren A. Janzig; Robert M. Skim	RECEIVED CENTRAL FAX CENTER
	Filing Date: December 9, 2003	Group Art Unit: 3738
	Examiner Name: Unknown	

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Initial	Document Number	Publication Date	Country	Translation	
				Yes	No

OTHER DOCUMENTS (Including Authors, Title of Item, Page(s), Vol/Issue No., Publisher, Place of Publication)

EXAMINER _____ **Date Considered** _____
*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in

***Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.**

Based on Form PTO-FB-A820
(Also form PTO-1449)

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